

In re Application of: Michael J. Borrelli
 For: **METHODS AND COMPOSITIONS FOR HEAT ACTIVATED GENE
 THERAPY USING CYTOLETHAL DISTENDING TOXIN**
 Attorney Docket No: 10546-109
 Express Mail[®] mailing label number: EV339727027US
 Date of Deposit: January 23, 2004

**BRINKS
 HOFER
 GILSON
 & LIONE**

UTILITY PATENT APPLICATION TRANSMITTAL

MS Patent Application
 Commissioner for Patents
 U.S. Patent and Trademark Office
 P. O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a new application under 37 C.F.R. §1.53(b), including the following elements and other papers:

1. ☒ Specification, including 49 pages of application (including title page, claims, Abstract, and 16 pages of sequence listing), and the following Appendices:
2. ☒ Combined Declaration and Power of Attorney (2 pages) (☐ Executed ☒ Unexecuted)
3. ☐ Information Disclosure Statement, including Form PTO-1449 (____ sheets) and copies of references cited
4. ☐ Assignment Recordation Cover Sheet and attached assignment to: William Beaumont Hospital.
5. ☐ Other: _____
6. ☒ Return Postcard
7. Fee calculation and payment:

Claims as Filed	Col. 1	Col. 2
For	No. Filed	No. Extra
Basic Fee		
Total Claims	31-20	11
Indep. Claims	4-3	1
Multiple Dependent Claims Present		

*If the difference in col. 1 is less than zero, enter "0" in col. 2.

Small Entity	
Rate	Fee
	\$ 385
x\$9=	\$ 99
x\$43=	\$ 43
+\$145=	
Total	\$ 527

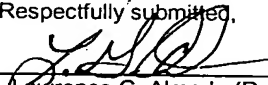
Other Than Small Entity	
Rate	Fee
	\$ 770
x\$18=	\$
x\$86=	\$
+\$290=	\$
Total	\$

- ☒ A check in the amount of \$527.00 to cover the filing fee is enclosed.
- ☐ Please charge my Deposit Account No. 23-1925 in the amount of \$____. A copy of this Transmittal is enclosed.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 23-1925. A copy of this Transmittal is enclosed.
- ☒ Any additional filing fees required under 37 CFR § 1.16.
- ☒ Any patent application processing fees under 37 CFR §1.17.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees during the pendency of this application or credit any overpayment to Deposit Account No. 23-1925. A copy of this Transmittal is enclosed.
- ☒ Any filing fees under 37 CFR § 1.16 for presentation of extra claims.
- ☒ Any patent application processing fees under 37 CFR § 1.17.
8. Correspondence Address: Please address all future communications to:

Lawrence G. Almeda
 BRINKS HOFER GILSON & LIONE
 P.O. Box 10395
 Chicago, IL 60610
 (734) 302-6000

Respectfully submitted,

January 23, 2004
 Date


 Lawrence G. Almeda (Reg.No. 46,151)
☒ Attorney Of Record
☐ 37 C.F.R. 1.34(a)

BRINKS HOFER GILSON & LIONE
 P.O. Box 10395, Chicago, IL 60610